

POSITION	ID NO.	DATE
CLASSIFIER	10	5-25-95
EXAMINER	230	5-30-95
TYPIST	819	12-1-95
VERIFIER	291	6-2
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Final	Original	Date
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